

COMMERCIAL LICENSE / PERMIT APPLICATION



IL 422-0471 8/07

APPLICATION

Please call 217 785-3423 if you have any questions. Department of Natural Resources information is available to the hearing impaired by calling DNR's TTY: 217 782-9175. You must enclose a check or money order with this application. **Do not send cash.**

The check box for Each License/Permit Applied for Special sturgeon id certification is required for a Commercial Roe Harvester Permit in the Mississippi Southern Zone.	FEE	ANN LICENSE EXPIRATI	/PERMIT
Retail Fur Buyer (Resident)	\$ 25	5 April 30)
Wholesale Fur Buyer (Resident)		April 30)
Fur Buyer (Non-Resident)	\$ 250	April 30)
Fur Buyer Auction Participation (Non-Resident)	\$ 50	April 30)
Interstate Minnow Dealer	\$ 500	Januar	y 31
Commercial Mussel (RESIDENT ONLY)	\$ 50	August	31
Initial Commercial Fishing (Resident)	\$ 35	March	31
Commercial Roe Harvester (Resident)	\$ 250	May 31	
Commercial Roe Harvester (Resident) Valid for Mississippi Southern Zone — Paddlefish, Sturgeon, Bowfin	\$ 250	May 31	
Commercial Roe Harvester (Resident) Valid for Mississippi Northern Zone, Wabash and Ohio River Zones	\$ 250	May 31	
Commercial Roe Dealer (Resident)		May 31	
Initial Commercial Fishing (Non-Resident)	\$ 150	March	31
Commercial Roe Harvester (Non-Resident) Valid for Mississippi Southern Zone — Paddlefish and Bowfin only	\$ 3500	May 31	
Commercial Roe Harvester (Non-Resident) Valid for Mississippi Southern Zone — Paddlefish, Sturgeon, Bowfin	\$ 3500	May 31	
	\$ 3500) May 31	
Commercial Roe Harvester (Non-Resident)	•	•	
Commercial Roe Dealer (Non-Resident)	\$ 1500) May 31	
BUSINESS NAME (enter NONE if not applicable)			
LAST NAME FIRST NAME			
MONTH DAY YEAR			
DATE OF BIRTH			
You must enter your Social Security Number OR DNR Direct Customer Number.			
Disclosure of applicant's Social Security Number is mandatory pursuant to 42 U.S.C. 666 (a)(13) and 5 ILCS 100/10-65(c) for use under the State's child support enforcement program. This number is located above your r	iame on voi	ır DNR license	
SOCIAL SECURITY NUMBER DNR Direct Customer Numb	•	di Bivit licerise.	
	1_		
ADDRESS			
CITY	STAT	E ZIP CODE	
COUNTY OF RESIDENCE	MAII	APPLICATION AND	FFF TO:
		IDNR	
		MERCIAL LICENSE. NATURAL RESOUR	
DAYTIME TELEPHONE NUMBER		P.O. BOX 19458	
	SP	RINGFIELD, IL 6279	4-9458

APPLICANT'S SIGNATURE

By signature above I hereby declare under penalty of perjury that the information provided is true and correct and I am not more than 30 days delinquent in complying with a child support order. Making a false statement may subject you to contempt of court. I further acknowledge that providing false or deceptive information in applying for a license or permit is a violation of law and may subject me to arrest and the revocation of my license privileges for a period of up to five years (III. Comp. Statutes Ch. 515, pars. 5/20-105 and 5/20-120 and Ch. 520, pars. 5/2.38 and 5/3.36).

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